



USER MANUAL



SECURE CLAIM
DENTAL

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1. Introduction

This guide is designed for Dental Healthcare Providers and Software Vendors that use Secure EDI to perform electronic transactions following the standards for privacy and security as well as for transactions and code sets as promulgated by HIPAA (Health Insurance Portability and Accountability Act of 1996).

Secure Claim allows dental healthcare providers to facilitate the Electronic Data Entry of Claims and establish a transparent connection to the claim(s) destination. There are additional functionalities which may not be included in this documentation. SecureClaim is meant to be simple to learn and use, however if you need assistance at any time using any of the features of SecureClaim, please contact a Secure EDI representative:

For Continental USA:

Call 800-466-9676

Fax :917-591-8247 or

email customer service at cs@secureedi.com

2. Before Starting

To assure success with this application and configuration process, please make sure that your system complies with the minimum requirements for this application. These requirements are listed below.

Hardware Requirements:

- Pentium Processor 366MHz or Higher
- 64 MB RAM Minimum (128MB or above recommended)
- 30 MB Minimum Hard Disk space available
- Broadband or dial-up Internet connection

Software Requirements:

- Microsoft Windows Operating System (95SE, 98SE, Me, NT, 2000, XP or Vista)
- Internet Explorer 5.5 SP1 or higher

Important Note

Secure Claim does not coexist with other installations of either SecureClaim or SecurEDILink. Only one version of SecureClaim Professional, SecureClaim Dental, SecureClaim Institutional or SecureEDILink can be installed per machine. Please contact SecureEDI customer support should you need any additional information about using multiple SecureEDI products on the same computer.

3. Installation

Step 1: Installation Confirmation

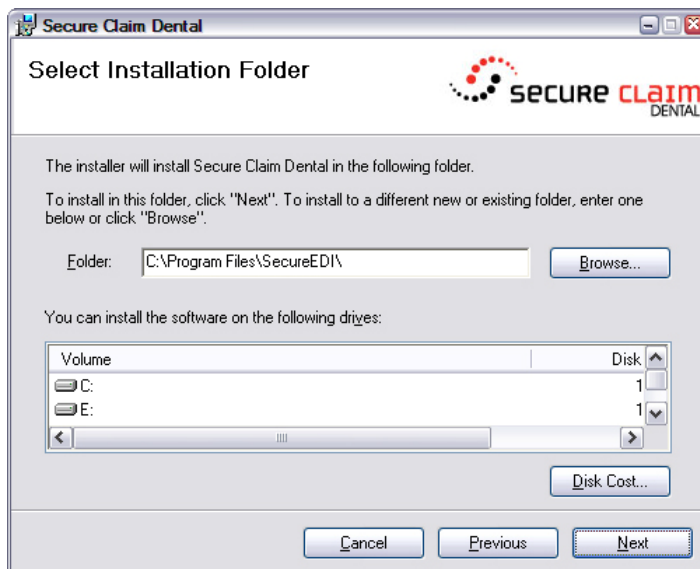


Click on the NEXT button to continue the installation process or press Cancel to close this window and cancel the installation process.

Note

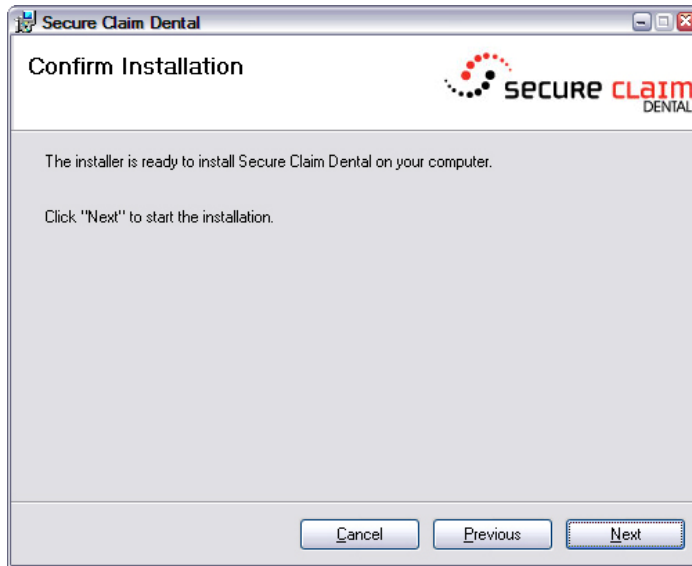
It is recommended that you close any applications or programs that are open before continuing the installation of SecureClaim Dental

Step 2: Select the Installation Directory



Select the location and folder where you would like the installation done or press the NEXT button to use the default location.

Step 3: Confirm Installation



Click NEXT to start the installation process. Click on the PREVIOUS button to return to the previous step or CANCEL to cancel the installation.

Note

If you receive a message indicating that a file cannot be replaced, *ignore* the message and click CONTINUE to continue the installation.

At the end of the process, click on the CLOSE button to close the window and finish the installation process.

4. Initial Setup and Configuration

Select Server and Connection Type

When using SecureClaim to test the sending of claims, please select TEST as the server name, To use SecureClaim to send your actual claims, select PRODUCTION. Production is the normal default setting. For the connection type, select "LAN" for connections using broadband Internet, dedicated line (T1/FT1) or a wireless connection. Select "Dial-Up" for a connection through a standard telephone line.

Note

Registration requires that you have an internet connection available.

Specify the access information

Enter the information related to "Username", "Password" and the "Activation key", as they were provided by Secure EDI before the installation process began.

If you do not yet have this information, please contact technical or customer support or send an email to cs@secureedi.com.

Once you complete the information required, press "Register" to begin the registration process.

Login

Please enter the "Username" and "Password" that you used during the registration process. If you changed your password using the Secure EDI website or during the registration process, please remember to use the new one here.



Please be advised that the "Password" is case sensitive meaning that what appears in capital letters should be entered in capital and what appears in small letters should be entered in small letters. Please check to ensure you do not have your keyboard's 'CAPS LOCK' button selected. If you encounter any difficulties, please contact technical support at the email address cs@secureedi.com.

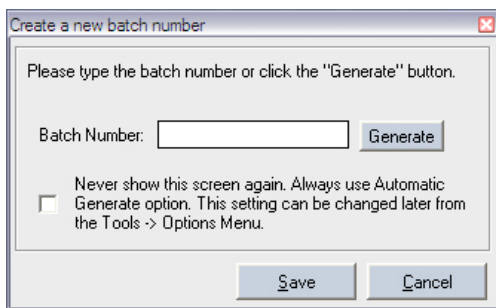
Click on the LOGIN button or press ENTER to continue.

5. Main Tool Bar

New Batch



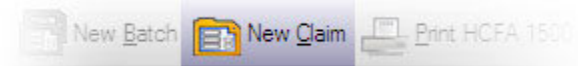
This option will allow you to create a new batch of one or more claims.



You will now be asked for the number you would like to assign to this new batch or if you desire this number to be generated automatically. If you would like SecureClaim always generate the numbers automatically, you can indicate that you do not want this question to be asked next time. Simply check the appropriate box to ensure select this

option. You can change this selection at any time in the future via the Tools, Options menu.

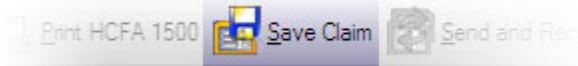
New Claim



This option will allow you to add a new claim to the selected batch. The appropriate claim form will be

displayed. For details about how to complete the claim form, please see the CLAIM FORM section.

Save Claim



Once you have completed the claim form, click on this button to save it to the batch. Once saved, the "Claims Tracking" window will display. If there are no errors found, the status will be shown as "Saved". Your claim is now ready for transmission.

Send and Receive



Use this button to begin the transmission of your claim(s). All the claims with status "SAVED" will be transmitted to the respective payers through "Secure Claim Clearinghouse".

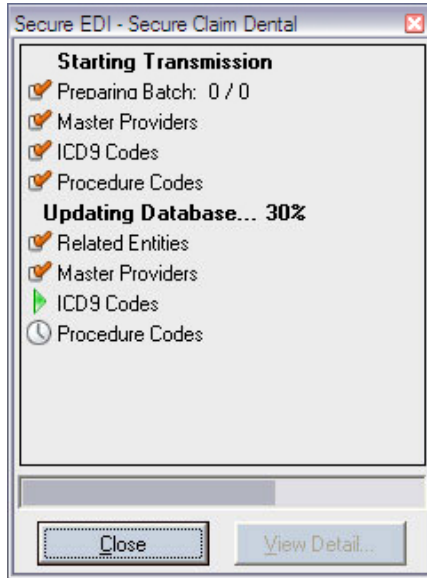
Remember, you can enter claims at any time even if you are not connected to the Internet and send them the next time you have a connection to the Internet. This allows you to enter claims at any time, regardless of your current Internet connection status. Once you are connected, you can hit "Send and Receive" and all the claims you entered since the last time you hit this button will be transmitted.



Also, this process can be used to receive the statuses on previously transmitted claims. You do not have to have any claims to send in order to press the "Send and Receive" button. If you do not have any claims to transmit you will only try to receive status about the claims that are being processed and see the message: "Waiting for Ack or Processing".

If there are open claims (with “Open” or “Editing” status) it will display the window that appears above, indicating that you should save these claims, giving the option to cancel the process or continue. Select “Yes” to cancel the process and return to previous screen or “No” to continue. If you choose to continue, the open claims will not be transmitted.

During the communication process with SecureEDI, a window will display indicating the status of the transmission, as it is shown in the following image:



Additionally, you will receive from SecureEDI status changes, confirmation messages and / or updates for SecureClaim.

All the claims received by SecureEDI go through a special validation process before being sent to the payer to ensure accuracy and avoid rejections.

If an error is found, only the claim(s) with an error will be rejected and the others will be transmitted to the designated payer(s).

Help



This button will open this guide.

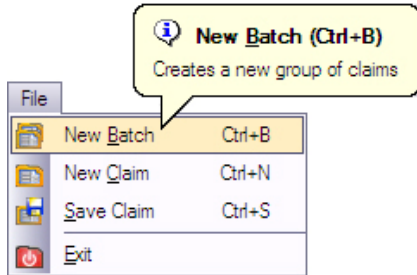
Exit



Click on this button to close the window and exit the application.

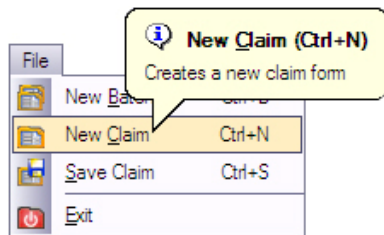
6. Menu of the Main Window

File



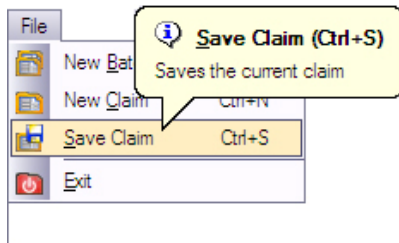
New Batch

This will create an empty batch so that a new claim or claims can be added. A batch can continue to have claims added until it has been saved and transmitted.



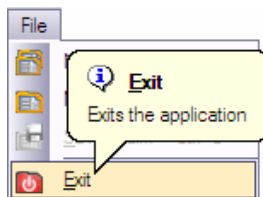
New Claim

This will add a new claim to the current batch. It will display the Claim Form. For details see CLAIM FORM section.



Save Claim

Once the claim form has been filled out, click on this button to save it to the hard disk of your PC. It will cause the Claims Tracking screen to be displayed. If there are no errors, the claim status will change to "saved". It is then ready to be transmitted.



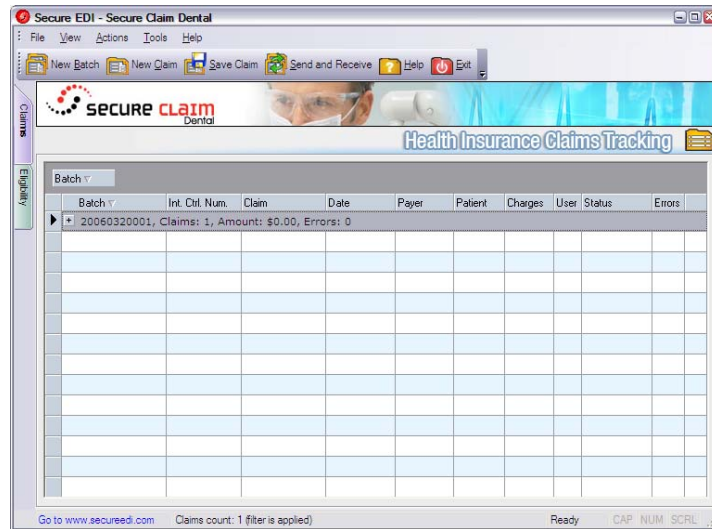
Exit

Click on this button to close this window and exit the application.

Actions

Claims Tracking

This is the default / first screen that appears after you login.



Collapse/Expand

Click on the plus sign (+) to collapse or expand the details of a specific batch (use this to hide or display details at your convenience).

Order by Columns

Click on any column header to sort a desired column.

Group by columns

Click and hold on any column header and drag it to the upper pane (above column headers) and then release the mouse button to drop the column. This will cause the rows to be grouped by the column you chose. To disable the 'group by' functionality, simply drag and drop the selected column back to its original position.

View Errors

After each transmission, errors may be received and reported by the Clearinghouse or from the payer directly. When there are errors, the claims and / or batches will be displayed in red and the "ERRORS" column will show a number greater than 0. To see number of errors in the batch, click with your mouse *right* button and select "View Errors" from the display menu.

A screen will then appear displaying a list of the errors one by one. Use the NEXT and PREVIOUS buttons to move forward and back while you review the errors.

Report

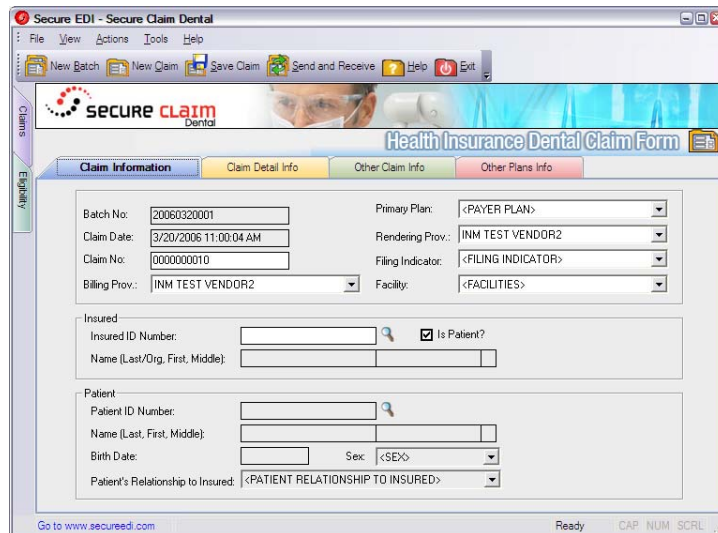
This report acknowledges receipt of the batch by the Clearinghouse and shows the Clearinghouse’s “Accept” or “Rejected” status for all claims in the batch.

Change the order of the column

You may change the order of the columns using your mouse through the “Drag and Drop” windows functionality. You can also drag the columns to the dark grey area where the Batch button is, to group the claims by the dragged column. This is very useful if you want claims of a specific plan, a specific date or a specific status. To take off the group you only have to drag the name of the column to the original position.

Claims Form

This option will display a form that allows you to create new claims or edit existing claims. A sample image of this screen is shown below.



The claim form contains various sections that can be identified by the following classifications: “Claim Information”, “Claim Detail Information”, “Other claim information” and “Other Plan Information”.

Claim Information

In this section you will enter information related to the Primary Plan, the provider who rendered the service, and information related to the patient / insured.

BATCH NUMBER

This is a reference number used to group the claims. You can have a maximum 100 claims in a batch.

CLAIM NUMBER

This is the claim number or the account number of the patient. This is generated automatically in an ascendant order, however it can be replaced with any value you prefer. If you are using manually entered values, please remember that this number must be unique.

BILLING PROVIDER

Select the Provider for which you are billing. The list will show all providers that have been checked as "Billing" during setup. Details about this indicator may be verified on the providers' management section, available through the menu option "Tools, Manage Providers".

INSURED ID NUMBER

You may enter the subscriber number or select it from the database by clicking on the search button. When you choose search, a list of all the registered members will be displayed for the plan/payer selected. If there are no members selected or if the member you are looking for do not appear in the list, you may need to create that registry for the payer/plan selected. After it is created, you may include it in the claim as it was explained above. Because the insured's information is a value required by HIPAA, all claims must contain this value. Therefore, is necessary to register this information about the insured and about the patient, when you are registering a new member.

PRIMARY PLAN

Select the primary Payer Plan from the list. If it does not display any Payer Plans in the list then you must create them using the "Tools, Manage Providers" option from the main menu. You should also complete the provider's information for providers associated with the plan(s). . Once this information is completed, you may return and select the primary Payer Plan where you wish to send the claim.

RENDERING PROVIDER

All providers marked as "Is Rendering" will be displayed on this list. Select from this list the provider that rendered the service.

FILING INDICATOR

Select an indicator from the list according to the type of plan that you are using to submit the claim, for example: commercial plan, Medicare Part A/Part B, HMO, PPO, Champus, etc.

FACILITY

Select the Place of Service from the list.

Claims Details Information

Permanent Missing Teeth Information

Please mark the patient’s permanent missing tooth or teeth, if any.

Primary Missing Teeth Information

Please mark the patient’s missing tooth or teeth, if any.

Procedure Date:

Enter the service date.

(This date can be selected from the calendar displayed for your convenience)

Area of Oral Cavity

Select the procedure performed from the cavities list.

Tooth

Select the tooth from the list for which the procedure has been applied.

Procedure Code

Enter the procedure code or use the “F5” key to display a list of valid codes. These codes will be validated against the current standard code list that was in place at the time the service was rendered.

Modifier

Up to three modifiers can be specified for each procedure code. These codes will be validated against the current standard code list that was in place at the time the service was rendered.

Placement Status

Indicates whether it is an initial placement or a replacement. If the service refers to a replacement, please indicate the initial placement date.

Qty

Number of times the procedure has been applied.

Charge

Enter the charged amount for the service line.

Others Claims Information

Rendering Facility

This is required when the service is rendered in a place that is different than the patient's home or the provider's office.

References

Use this field to indicate any referring provider information.

Remarks

Free text up to 80 characters can be entered to provide any information or additional notes to this claim, such as an attachment number.

TYPE OF TRANSMISSION/TREATMENT INFORMATION

Statement or Actual Services/Request for Predetermination /PreAuthentication.

Use this section if the current bill is for the actual services or if it is request for authorization and payment for dental services provided to eligible recipients.

EPSDT/TITLE XIX

Check this field for Early and Periodic Screening and Treatment or/and for Medicaid Federal Assistance program recipients.

Predetermination/Preauthorization Number

Use this field to enter the seven digit preauthorization number obtained from the payer.

Resubmit Code

Enter the resubmission code when the current claim is a resubmission.

Other

Check this field if the service is an Orthodontic treatment.

Date appliance placed

Use this field to enter the date the appliances were placed. This field is only available when the treatment for Orthodontics is chosen.

Months of treatment remaining

Enter the number of months or monthly visits for orthodontic treatment(s) remaining after the initial placement.

Patient’s Condition

If the patient’s condition is related to an accident, employment or other accident, please select the corresponding box.

Other Plans Information

This section will allow the provider to specify secondary and tertiary plans.

Identification

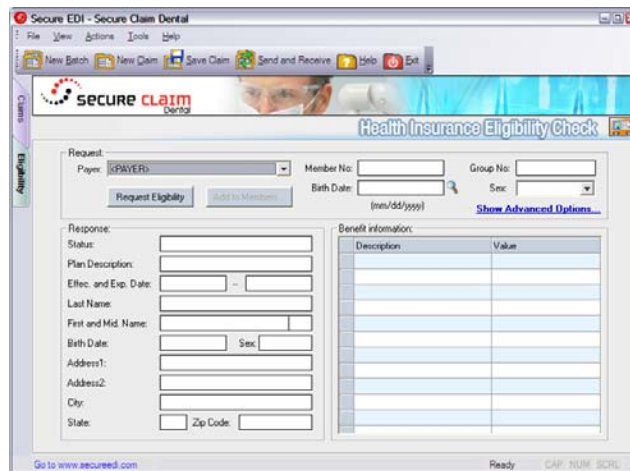
Select the name of the plan from the list. If the desired plan is not listed, please select the option from the menu Tools, Manage Providers” to add the ID of the provider(s) for the plan you want to select.

Insured ID Number

Select the patient / insured for the selected plan. If the patient / insured does not appear on the list, you can add it using the button “Create new” option.

After all the required fields are completed in this claim form, click on the SAVE button to validate and save your claim. This will add it to the current “batch” with the SAVED status. Every time you open a claim that has already been completed, the status will change to “EDITING”.

Eligibility Request



This section is used to check patient eligibility for plans. You will receive an answer in real time - approximately 3 to 15 seconds. In addition, it will allow you to export the information from the eligibility check directly to the Manage Members window in the Tools menu for added

convenience.

Payer

Select from the list the plan for which you will make the eligibility request.

Member No:

Enter the ID of the insured or dependent.. Please enter it exactly as it appears on the patient or dependent’s insurance card.

Add to member:

This option will allow you to export the information obtained from eligibility to the members profile. Use the option "Create Member" in "Tools, Manage Members" section and fill out all the fields to make the creation of claims easier.

Birth date:

Enter the patient's birthdate.

Group Number:

Enter the group number from the patient's insurance card.

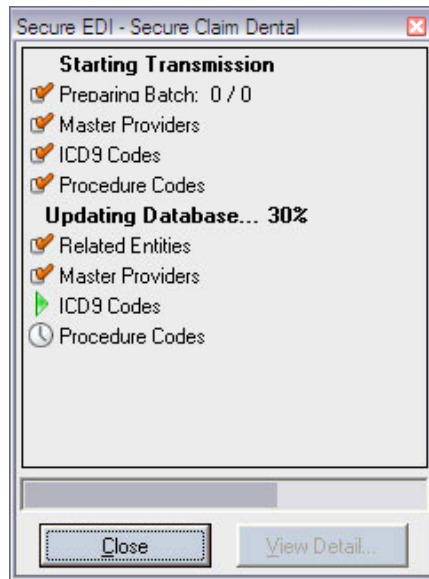
Sex:

Select the patient's gender from the list.

Show advance options:

When you access this option you will have access to the advanced entry fields related to MEDICARE eligibility:

- **Member Last and First Name:** Enter the last name and the first name of the main insured.
- **Eligibility Date:** Enter the date of service.
- **Dependent Last and First Name:** Enter when the ID holder is not the primary insured.
- **Service Type:** Indicate the type of service.

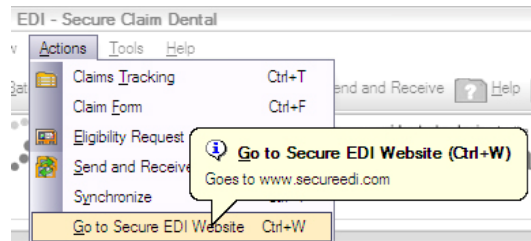


Synchronize

This process synchronizes the local database with SecureEDI. The data that is synchronized may include: information about the account, medical plans, provider list, procedure codes, diagnosis codes, etc.

After each transmission, an incremental synchronization will take place automatically (changes in the data after the last synchronization), however when this menu option is used, the synchronization performed is a complete synchronization (All data, regardless of where it was changed or not – choosing this option will not cause any problems even if data was not changed).

Go to SECURE EDI Website



This screen will allow you to access our website on the Internet, where you can follow up your claims via status, tracking or other details as well as ERA and other valuable transaction services.

Send and Receive

Select this option to start the transmit and receive process as described previously in the description of the "Tool Bar, Send/Receive" option

7. Tools

Manage Members

This screen is used to create a new member or edit existing members. They can be filtered by payer.

Manage Providers

This option will allow you to manage the information required for billing providers and for providers that rendered service (“rendering providers”), as well as information about the medical plans the providers are affiliated with.

Listed in this window are registered providers for the facility or office. To edit the information for a specific provider, click on the provider name to select it, then click on “EDIT PROVIDER”.

The provider management form shown below will be displayed. You can also double click on the selected provider to open the provider management form.

To create a new provider, click on “CREATE NEW PROVIDER”.

Click on the button “CLOSE” to close this window.

PROVIDER MANAGEMENT

The screenshot shows a 'Provider Management' window with the following fields and options:

- Name (Last/Org, First, Middle): Three text input boxes.
- Address 1: One text input box.
- Address 2: One text input box.
- City, State, Zip Code: One text input box, a dropdown menu, and a search button.
- EIN/SSN: Radio buttons for 'EIN' (selected) and 'SSN', followed by one text input box.
- Taxonomy Code: One text input box.
- Entity Type: A dropdown menu with '<ENTITY TYF' selected.
- Checkboxes: 'Is Billing?' (checked), 'Is Rendering?' (checked), 'Accepts Medicare Assignment?' (checked), and 'Active' (checked).

Name (Last/Org, First, Middle)

Enter the Provider Last Name or Organization name, followed by first and middle name, when applicable.

Address1

Street Name and Number.

Address2

Building Name, Suite number, if applicable.

City, State, Zip Code

Enter the City Name, State (2 characters) and Zip Code. Click on the SEARCH button to display a list of valid states to choose from. Valid Zip Codes are 5 or 9 digits only – please do not enter dashes..

EIN/SSN

Enter the provider's Federal Tax Identification Number or Social Security Number.

Billing

If this is a Billing Provider, then there must be a check mark. If this provider will never be a rendering provider, such as a hospital, provider group, etc., please leave this check mark off.

Taxonomy Code

Please specify the standard specialty code for this provider, also called the 'Taxonomy Code'.

Entity Type

Select the Person/Organization according to the type of provider.

Accepts Medicare Assignment

If provider accepts Medicare assignments, enter a check mark.

Active

Use this check mark to enable / disable a provider. When the provider is not active, his name will not appear on the providers' list in the claim form.

PAYER INFO

Payer Info:			
Payer	Plan Description	Identifier	Qualifier
▶			G2, ...

Payer

Select a payer or plan from the list.

Plan Description

Enter the specific plan description.

Identifier

Enter the provider identification that the payer / plan assigned. If you have more than one provider number for the same payer / plan, add the additional identification numbers here as well.

Qualifier

For default, this qualifier will be G2. You can leave this value or select any other qualifier, if required by the payer / plan.

Press ENTER to add an entry. Repeat the process to add another identification number with another payer or medical plan.

Press OK to close the provider management window and save the current information or press CANCEL to exit without saving the changes.

Manage Referring Providers

This option will allow you edit referring provider information.

Manage Control Numbers

This selection is exclusive for SecureEDI technical use.

Manage Procedures Rates

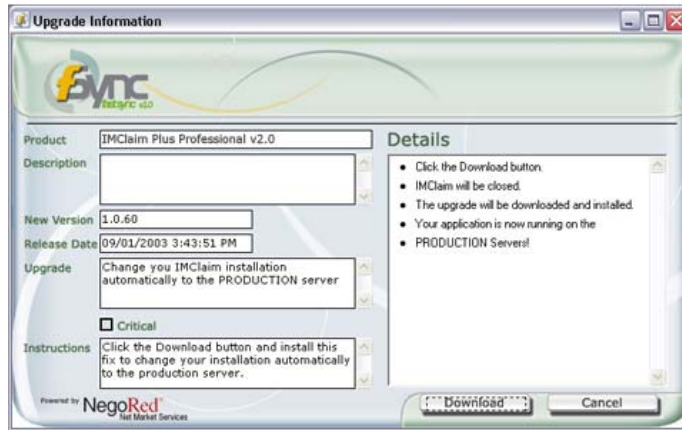
With this Tool, rates can be administered for the plans. You can modify the ones generated by the use of the SecureClaim. In addition, you can manually add and delete rates/prices by payer.

Import and Export Members Options

Allows you to export members to a text file.

Check for Updates

Use this option to manually check for the existing new versions, updates or patches to the Secure Claim application or when instructed by a technical support representative.



When there is a new version available, a window will display automatically alerting you of the new available updates.

If you have any open claim at the moment you execute the revision of new versions it will display

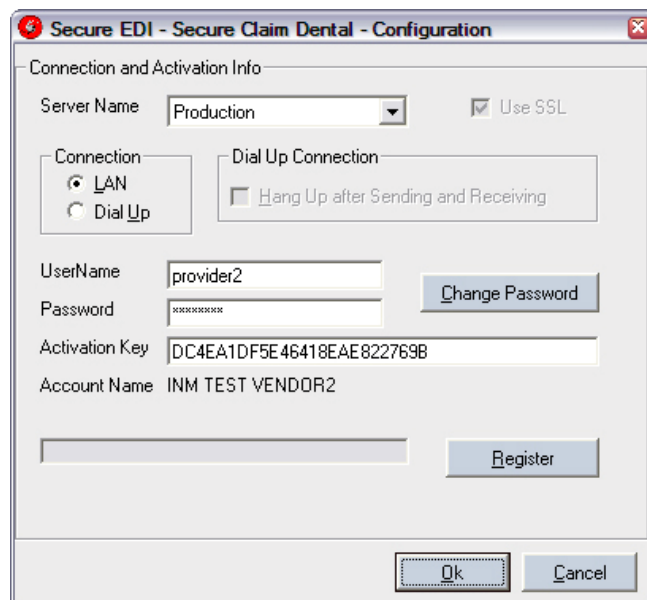
a message indicating that the current claim must be saved first. If this happens, click on "Save Claim" and proceed.

After this process, a window will display containing the information related to the new version, update or patch as well as displaying the description of new features contained in the update.

Press the "Download" button to start the process of downloading the update. Press "Remember Later" if do not want to apply the update at this moment.

If an upgrade is critical, the application will not allow you to update later and will require that you download the update at this point.

Connection Info



The window of options that will appear will allow you to check and change your connection configuration.

Select the name of the server that will handle the transmission. Select PRODUCTION to transmit real transactions to payers and plans. Please note, if enrollment is required or has been requested and not approved, the claim will reject.

Note

To change the test server (TEST) to production (PRODUCTION) or vice versa, it is not enough to select the name from the list of servers and press OK, it will be also necessary to register for the server you just change to. For this, open the ORGANIZATION and click on REGISTER. The server change will ONLY take place after receiving the message "Registration completed successfully". If you receive an error during this process, the server change request was not completed and you must try again or contact SecureEDI technical support.

Connection:

Select LAN if your internet connection is through broadband connection (e.g. DSL or Cable), dedicated circuit, or wireless Internet connection. Select Dial Up if the connection is performed through a telephone line.

NOTE: When a telephone line is used, you can choose the option "Hang Up after Sending and Receiving". This will allow the line to be freed automatically after the send and receive process is finished, allowing the line to be free for other devices that may be sharing like fax, point of service terminal, etc.

User Name, Password, Activation Key:

- a) Enter "Username", "Password" and "Activation Key" provided by Secure EDI after your registration process. If you have already changed your initial password, please enter the current one here
- b) To change the current password, click on the "Change Password" button and complete the required additional steps.
- c) Click on the "REGISTER" button to register for the server you will be submitting transactions to, TEST or Production. You must always press this button when changing the server from TEST to PRODUCTION and vice versa.

8. Help

This option will open the user guide.

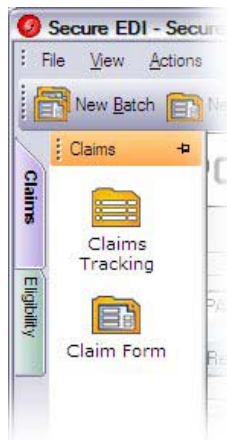


9. About

This option will display the application version, activation key and the organization or individual to whom the application has been licensed, as well as copyrights and registered trademarks..

10. Left Pane Menu Bar

Claims



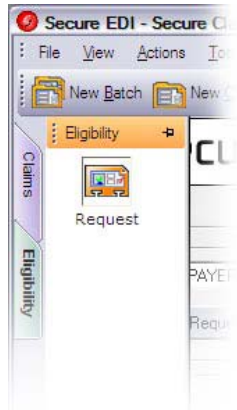
Claim Tracking

The functionality of this button is the same as that in the Actions, Claim Tracking menu option described previously.

Claim Form

This will open the Claim form window.

Eligibility



Request

This will open the “Eligibility Request” window described previously when the “Action-Eligibility request” menu option was described.

11. Troubleshooting

Error	Descriptions	Comments
401	HTTP Status Denied	Invalid username and / or password specified.
12045	HTTP Invalid Certificate Authority	The required digital certificate has not yet been installed in your PC. Please review the installation process for instructions on how to install this certificate.
Account is locked	This account can not be used again until it is released by Secure Edi contact customer service.	
12002	HTTP Connection Time Out	A connection could not be established due to a slow or inactive communication method. Please try again.
12029	HTTP Cannot Connect	A connection could not be established .
12031	HTTP Connection Reset	The connection was lost. Please try connecting again.

12. Technical Support

Internet

For consultation on our products and solutions, to uninstall components or updates, use our website at <http://www.secureedi.com>.

E-Mail:

Send an email message to our technical support staff for assistance with installation or use of SecureClaim to cs@secureedi.com.

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